

MED-IT

Anna Osborne, Team Lead
Greg Valverde, Systems Analyst

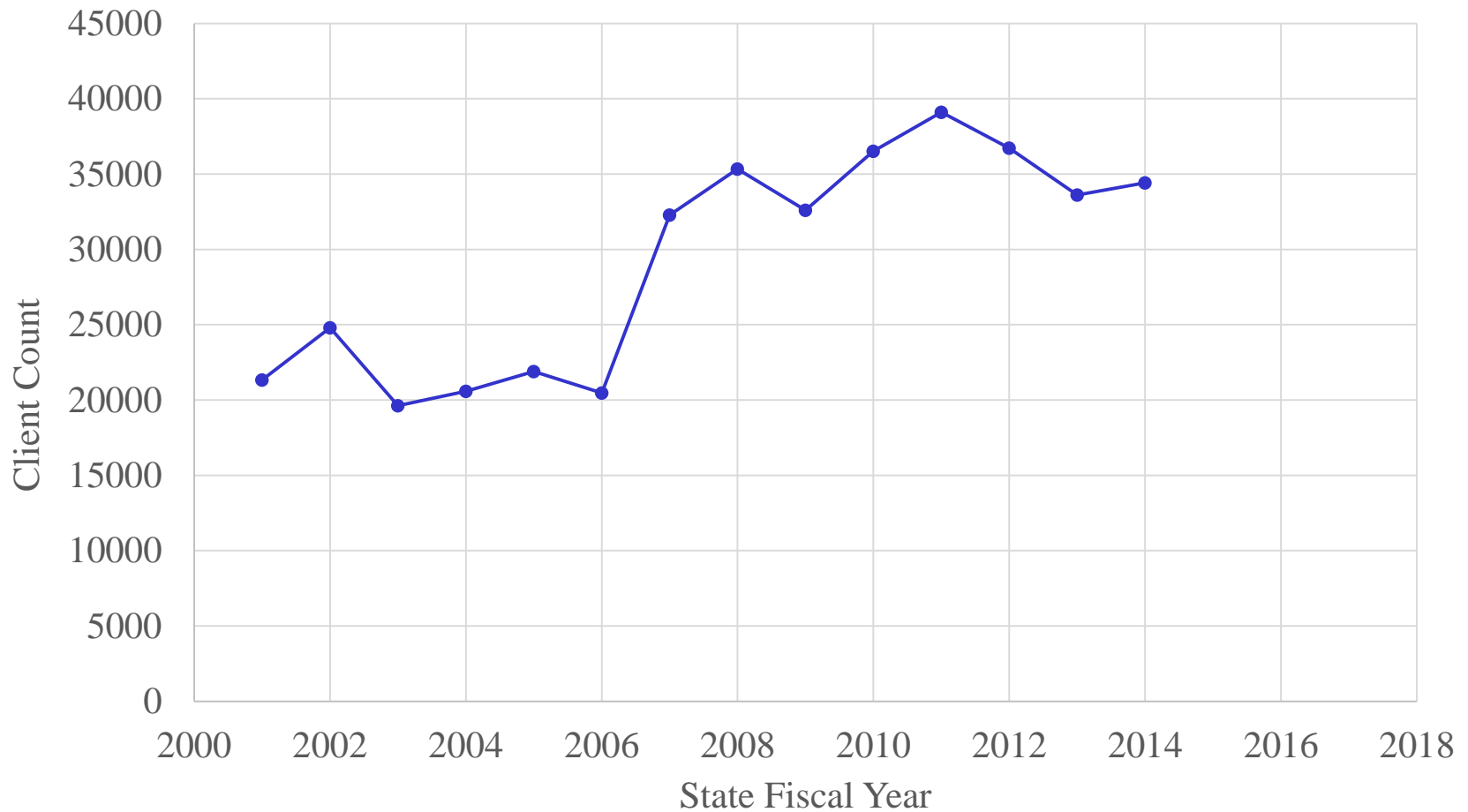
-
- Data history
 - Data team responsibilities
 - Minimum Data Elements
 - MED-IT at-a-glance
 - Reports overview
 - Training Cycles
 - Looking Forward
 - Questions

Data History

Data History

- 1991: Inaugural year
 - 72 Contractors
 - 13,868 Distinct Clients
- 2015: Last year
 - 41 Contractors
 - 34,376 Distinct Clients
- 2016: Current year
 - 36 Contractors
 - 25,000 to date

Data History

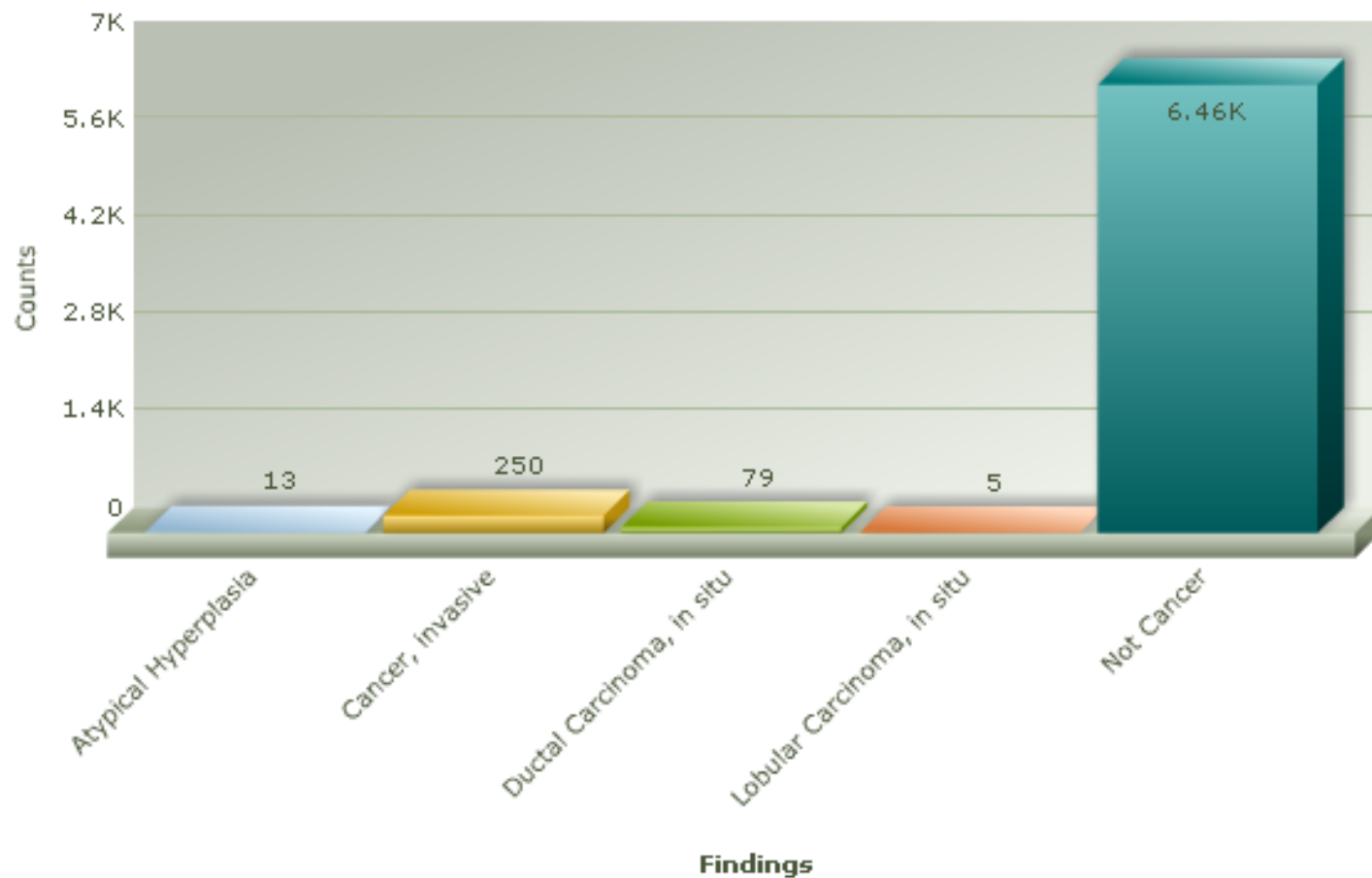


- 1991 – 2016 Services Provided
 - Clinical Breast Exams
 - 447,201
 - Mammograms
 - 381,848
 - Pap Smears
 - 329,995
 - HPV Tests
 - 23,071

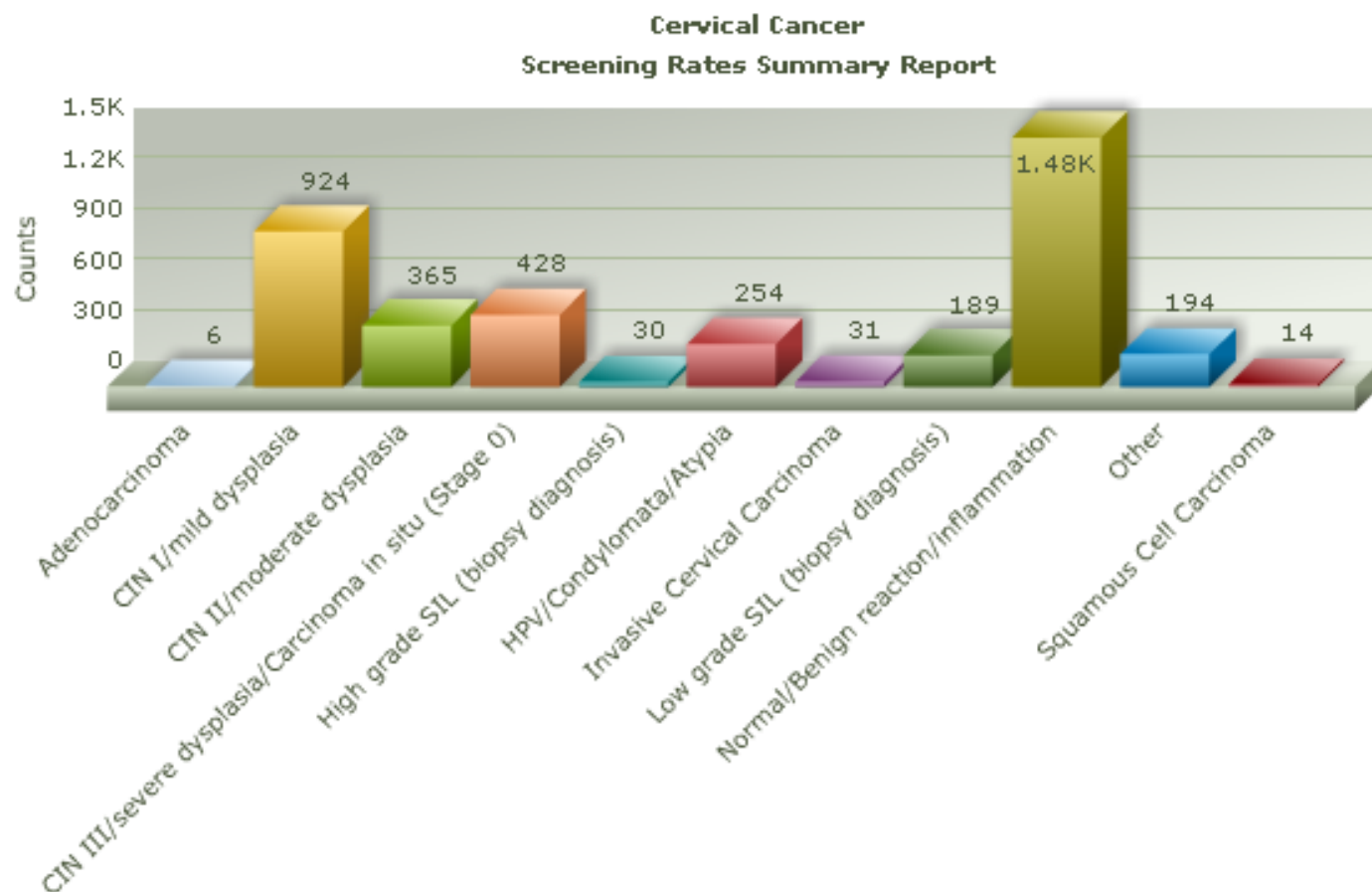
State Fiscal Year 2015

Breast Cancer

Screening Rates Summary Report



State Fiscal Year 2015



Data Team Responsibilities

Data Team Responsibilities

- Minimum Data Elements – NBCCEDP
- Med-IT
 - Reporting
 - Payment Process
 - Improvement

Minimum Data Elements (MDEs)

Data Team Responsibilities

Minimum Data Elements – NBCCEDP

- Ensure completeness, accuracy, timeliness
- Link MDE data with Texas Cancer Registry
- Submit twice a year to CDC
- Respond to new reporting requirements
- Respond to action items from CDC
- Measure effectiveness and efficiency of all clinical provisions.

Data Team Responsibilities

Screening

MDE	CDC Standard
Initial Program Pap Tests; Rarely or Never Screened	$\geq 20\%$
Mammograms Provided to Women ≥ 50 Years of Age	$\geq 75\%$

Data Team Responsibilities

Cervical Cancer Diagnostic Indicators

MDE	CDC Standard
Abnormal Screening Results with Complete Follow-Up	$\geq 90\%$
Abnormal Screening Results; Time from Screening to Diagnosis > 90 Days	$\leq 25\%$
Treatment Started for Diagnosis of HSIL, CIN2, CIN3, CIS, Invasive	$\geq 90\%$
HSIL, CIN2, CIN3, CIS; Time from Diagnosis to Treatment > 90 Days	$\leq 20\%$
Invasive Carcinoma; Time from Diagnosis to Treatment > 60 Days	$\leq 20\%$

Data Team Responsibilities

Breast Cancer Diagnostic Indicators

MDE	CDC Standard
Abnormal Screening Results with Complete Follow-Up	$\geq 90\%$
Abnormal Screening Results; Time from Screening to Diagnosis > 60 Days	$\leq 25\%$
Treatment Started for Breast Cancer	$\geq 90\%$
Breast Cancer; Time from Diagnosis to Treatment > 60 Days	$\leq 20\%$

Data Team Responsibilities

- Data Team provides two MDE data exports a year to CDC with MDE data.
- PI reports indicate how well the state is meeting grant requirements.
- Med-IT can run a report at the push of a button to review the performance indicators for each contractor.

Med-IT

-
- Med-IT
 - Improvements
 - Training
 - User Support
 - Med-IThelpdesk@hhsc.state.tx.us

-
- OxBow Data Management Systems LLC developed Med-IT in cooperation with another major state health department and designed to meet all the requirements of the Centers for Disease Control.
 - An online Medical Information Tracking System (Med-IT®) that merges health screening data management with eligibility computing, reporting and billing
 - Over 1 million women in eleven states and Tribal Communities utilize Med-IT®'s range of capabilities to manage their CDC funded programs

-
- Med-IT securely encrypts all information collected and entered into the system at rest and while it is being transmitted.
 - User access is limited based on permissions set by System Administrators
 - All data handling complies with HIPAA regulations



Production Server

<https://www.med-itweb.com>

Test environment

<https://test.med-itweb.com>

Medit 2.5.7.25

Welcome to Med-IT

Med-IT is an Online Medical Information Tracking System developed by OxBow Data Management Systems, LLC that gives health programs a complete web based health screening information database system that includes demographic information, automatic eligibility computation, billing and much more.

Please Log In

User Name

CDC Program Code

Sign In

Cancel

[Trouble logging in?](#)

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MED-IT at-a-glance


-
- User Roles
 - **Admin**
 - This role is for BCCS and Oxbow staff only. It is to enable program oversight and allow the admin to assist the many contractors
 - **Data Entry**
 - Data entry staff will enter items from health screening, clinical information, demographic information and eligibility computation.
 - **Billing/Supervisor**
 - This role was created to allow the BCCS contractors to bill for services they provide to clients.
 - Gaining Access to Med-IT
 - **Designated Program Coordinator fill out the request form.**

Client Search

Texas Breast & Cervical Cancer Services

[Client Info](#)
[BCC Data](#)
[Billing](#)
[Contract/Provider](#)
[Reports/Utilities](#)

[Log Off](#)
[Admin](#)



Switch Client

ID


Reminders

Quick Links

[\[Reload Screen\]](#)
[Search Client](#)
[Quick Tips](#)
[State Manual](#)
[Terms of Use](#)
[Med-IT Privacy Policy](#)

Logged In As

This Page May Contain Protected Health Information



Search Clients

☒ Search By ID(s)/Numbers

SSN:

Med-IT ID:

Legacy ID:

Additional Code:

Account #:

Medicaid #:

☐ Search By Name/DOB/Zip Code

Screening Cycles

#	Date	Age	N1	N2
N/A				

Due Dates

0 Alert! (MDE 6.0)

Client ID	Client Name	Client Address	Client City	Client State	Client Zip
12345	John Doe	123 Main St	Houston	TX	77001
67890	Jane Smith	456 Oak St	Dallas	TX	75201
11111	Bob Johnson	789 Pine St	Austin	TX	78701
22222	Alice Brown	101 Elm St	San Antonio	TX	78201
33333	Charlie Davis	202 Maple St	Fort Worth	TX	76101

Client information

Personal Information

Name:

[LAST NAME]

[FIRST NAME]

[Last name, First name, MI]

Maiden Name:

SSN:

Date of Birth:

[mm/dd/yyyy]

Note:

B

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Contact Information

Address:

Address 2:

Zip Code:

State:

Select one ▾

County:

Select one ▾

City:

Equivalent County:

Select one ▾

Email:

Phone 1:

Type:

Select one ▾

☒ Preferred

Phone 2:

Type:

Select one ▾

☐ Preferred

Phone 3:

Type:

Select one ▾

☐ Preferred

Best Time to Call:

☐ Alternate Contact

Eligibility

Client's Eligibility [?] [H] [O]

Eligibility

Client's household income BEFORE TAXES: [Numbers only, do not use comma (,)]

Income frequency: Annual

Number of people living on this income: 2

Eligibility level: 0

Not Signed

Program acceptable eligibility is upto 25000%

Medical release form signed and dated: ☐ Yes ☐ No ☐ Unknown

Client has Medicaid: ☐ Yes ☐ No ☐ Unknown

Medicaid for Treatment start date: [mm/dd/yyyy]

Medicaid for Treatment end date: [mm/dd/yyyy]

Medicare: ☐ Yes ☐ No ☐ Part A Only ☐ Unknown

Insurance: ☐ Yes ☐ No ☐ Insufficient ☐ Unknown

Coverage Info:

Other Payment Program: Select one

Medicaid Number:

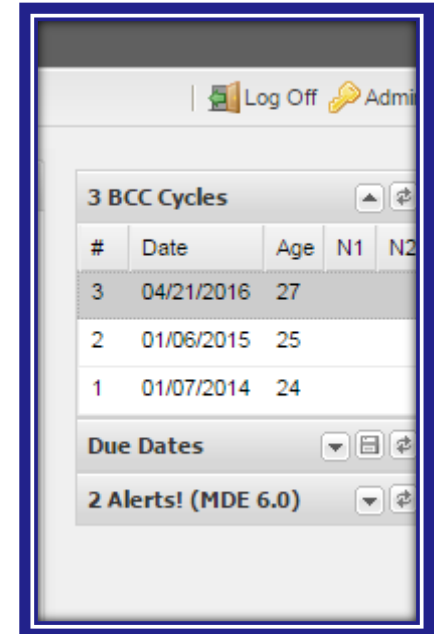
Cycles Initiation

Med-IT cycles capture procedures/outcomes that allow tracking of BCCS services

Cycles also provide a snapshot of client's BCCS history.

New Cycle initiation examples:

- Cervical Screening
- Breast Screening
- Referrals (Diagnostic)



The screenshot displays a web application interface for tracking BCCS cycles. At the top, there are links for 'Log Off' and 'Admin'. Below this, a section titled '3 BCC Cycles' contains a table with the following data:

#	Date	Age	N1	N2
3	04/21/2016	27		
2	01/06/2015	25		
1	01/07/2014	24		

Below the table, there are sections for 'Due Dates' and '2 Alerts! (MDE 6.0)', each with a dropdown menu and a refresh icon.

Routine Screening

Office Visit

* Visit Type: Select one ▼

* Date of Service:

Date Received:

* Provider: Select one ▼

Clinician: Select one ▼

Chart Number:

Comments:

☒ Breast Screening

Breast Symp. Reported: Select One ▼

* CBE: Select one ▼

Date of CBE:

BSE: Select One ▼

BSE Date:

☒ Cervical Screening

Cervix Present: Select One ▼

Post Menopause: Select One ▼

Pelvic Exam: Select one ▼

Date of Pelvic Exam:

Imaging & Diagnostic Procedures

Diagnostic Procedure for cycle # 1

Chart Number:

Date of Service: [mm/dd/yyyy]

Date Received: [mm/dd/yyyy]

Referred By: ▼

Provider: ▼

Diagnostic physician:

Date Referred: [mm/dd/yyyy]

Why Referred:

Refused Procedure: ☐

Covered Office Visit: ☐ Yes ☐ No

Diagnostic Procedure: Enter Date of Service first

Pathology Report Rcvd: ☐ Yes ☐ No

Procedure Result: ▼

Client Notified: ☐ Yes ☐ No

Paid with CDC Funds: ☒ Yes ☐ No ☐ Unknown

☐ Exclude From Missing Claim Report

Diagnosis & Treatment

Final Diagnosis and Treatment record for cycle # 1

Final Diagnosis/Imaging Outcome

Diag./Img. Disposition:

Date of Diag./Img.: [mm/dd/yyyy]

Final Diagnosis:

Laterality: ☐ Left ☐ Right ☒ Both

☒ Navigation Needed

Include Treatment: ☒ Uncheck to remove Treatment information

Treatment

Treatment	Recommended	Performed	Date
<input type="checkbox"/> Simple Mastectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Rad. Mast. & Chemo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Mod.Mast. & Chemo &Rad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Mod Mast. & Chemo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Lump. & Radiation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Chemotherapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Lumpectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Modified Mastectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Radiation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Radical Mastectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Treatment: ☐ Not Indicated ☐ Indicated

Treatment Refused: ☐ Yes ☐ No

Treatment Disposition:

Treatment Disposition Date: [mm/dd/yyyy]

Client Navigation

Navigation [?] [H]

Navigation Record for Client Test

Clinical Navigator:

Started: [mm/dd/yyyy]






Why Started:

Followup Date: [mm/dd/yyyy]

Date Closed: [mm/dd/yyyy]

Reason Closed:

Notes:

B **I** **S** **I_x**     

Summary of Services

Ex. Of a Cycle showing screening and finding

Summary of Services view

Summary of Services						
Ser... Type	Cycle Number ^	Service/Procedure	Date	Result/Outcome		Paid By CDC Source
Service Type: BCC (9 Items)						
<input type="checkbox"/>	BCC 1	Cycle Initiation	08/03/2011	Mam Ind: Routine, Pap Ind: Breast Only		N/A CYCLE_INITIATION
<input type="checkbox"/>	BCC 1	Office visit (R), CBE	08/03/2011	CBE: Normal exam		CBE: Y PeMco: OFFICE_VISIT
<input type="checkbox"/>	BCC 1	Mammogram (Screening Digital)	08/08/2011	Negative (BI-RADS 1)		N MAMMOGRAM
<input type="checkbox"/>	BCC 2	Cycle Initiation	06/06/2013	Mam Ind: Routine, Pap Ind: Breast Only		N/A CYCLE_INITIATION
<input type="checkbox"/>	BCC 2	Office visit (R), CBE	06/06/2013	CBE: Normal exam		CBE: Y PeMco: OFFICE_VISIT
<input type="checkbox"/>	BCC 2	Mammogram (Screening Digital)	06/14/2013	Negative (BI-RADS 1)		Y MAMMOGRAM
<input type="checkbox"/>	BCC 3	Cycle Initiation	03/14/2016	Mam Ind: Routine, Pap Ind: Breast Only		N/A CYCLE_INITIATION
<input type="checkbox"/>	BCC 3	Office visit (R), CBE	03/14/2016	CBE: Normal exam		CBE: Y PeMco: OFFICE_VISIT
<input type="checkbox"/>	BCC 3	Mammogram (Screening Digital)	04/01/2016	Negative (BI-RADS 1)		Y MAMMOGRAM

Payment Process

Payment Process Overview

Contract Balance Reports help make decisions, such as

- When to enroll patients in BCCS or
- Utilize other funding sources.

Services must be provided in the specified budget period to be paid out.

Pay attention to which funds have lower or higher balances and what services are being provided.

If you are uncertain, you can ask program staff.

BCCSprogram@hhsc.state.tx.us
(512) 776 - 7796

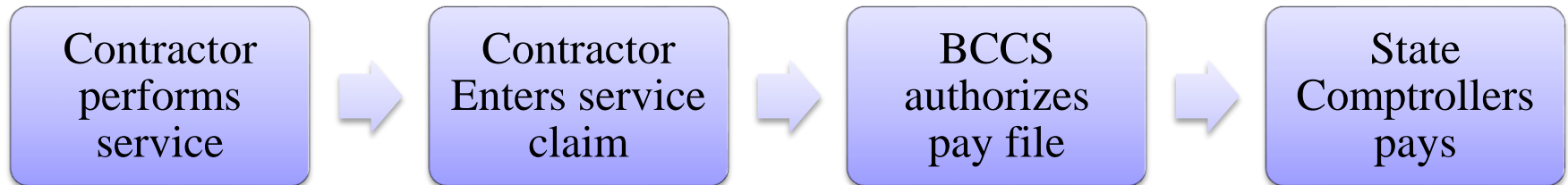
Funding in Med-IT

Each funding stream has different requirements, as summarized in the table below.

		Med-IT Label	Allowable Use	Availability
Federal	{	ACA_10_Month	Screenings/Diagnostics	09/01 – 06/30
		ACA_2_Month	Screenings/Diagnostics	07/01 – 08/31
State	{	General Revenue (GR)	Match for Screening/Diagnostics and MBCC Processing	09/01 – 08/31
		TANF	Women 40-49 (B Codes in Med-IT)	09/01 – 08/31
		Title V	Cervical Dysplasia (CD Codes)	09/01 – 08/31

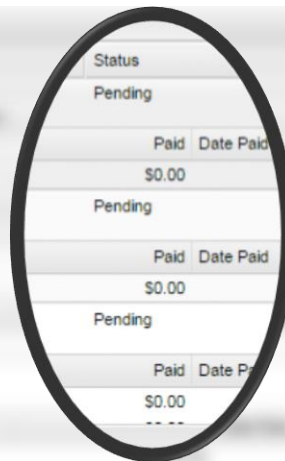
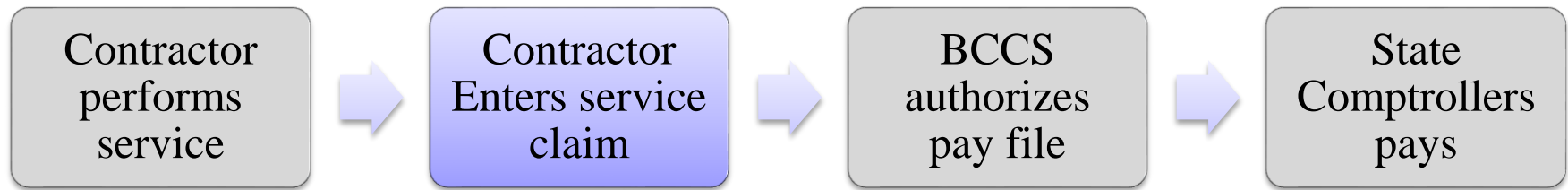
ACA_6_Month will not be a bucket in FY17

Payment Process



Payment Process

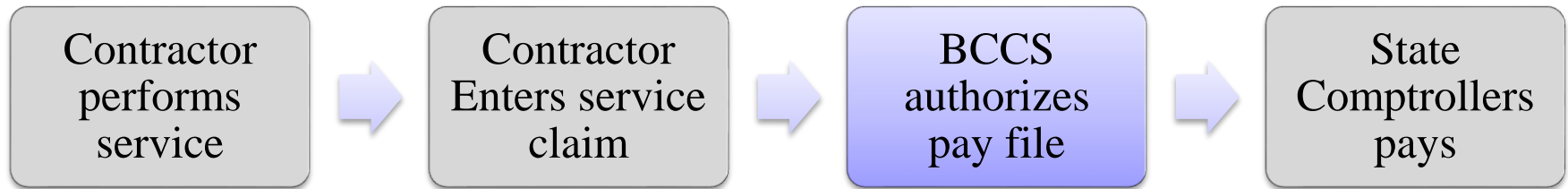
Claim Status



Status
Pending
Paid
Date Paid
\$0.00
Pending
Paid
Date Paid
\$0.00
Pending
Paid
Date Paid
\$0.00

Payment Process

Invoice Status



Texas Breast & Cervical Cancer Services

Client Info ▾ BCC Data ▾ **Billing ▾** Contract/Provider ▾ Reports/Utilities ▾ Type to find... ▾

Billing Authorization
Claims/Billing
Invoices

Navigation

Claims/Billings Billing Authorization Invoice

List of all Invoices

	Invoice #	Status	Contract	Status Date
<input type="checkbox"/>	2016000242	Authorized	073- Cherokee County Health Dept.	08/02/2016
<input type="checkbox"/>	2016000241	Authorized	085- South Texas FP&Health Corp	08/01/2016

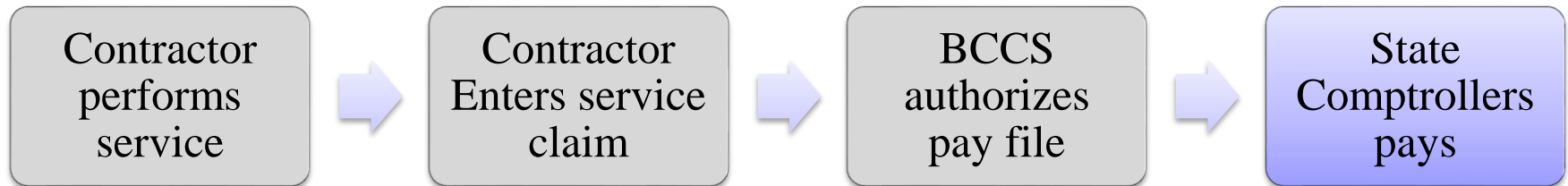
Switch Client

ID [] Go

Note: previous invoices can be pulled on this screen

Payment Process

Pay Status



Deleting Services

Pending claims can only be deleted by Program staff.
If you billed anything by error, please email

Med-IThelpdesk@hhsc.state.tx.us

The following data is required when requesting a deletion:

- Med-IT ID# of the patient
- Cycle # of item to be deleted
- Service date
- CPT code of item(s) to be deleted
- Brief summary of reason for request

Reports Overview

Data Team Responsibilities

– Reports

- Legislative
- Media
- Ad hoc
- Administrative
 - Demographic Report
- Billing
 - Contract Balance Report
- Client management and QA
 - Follow-up Report

A few reports in MED-IT are most frequently utilized for program data and process analysis

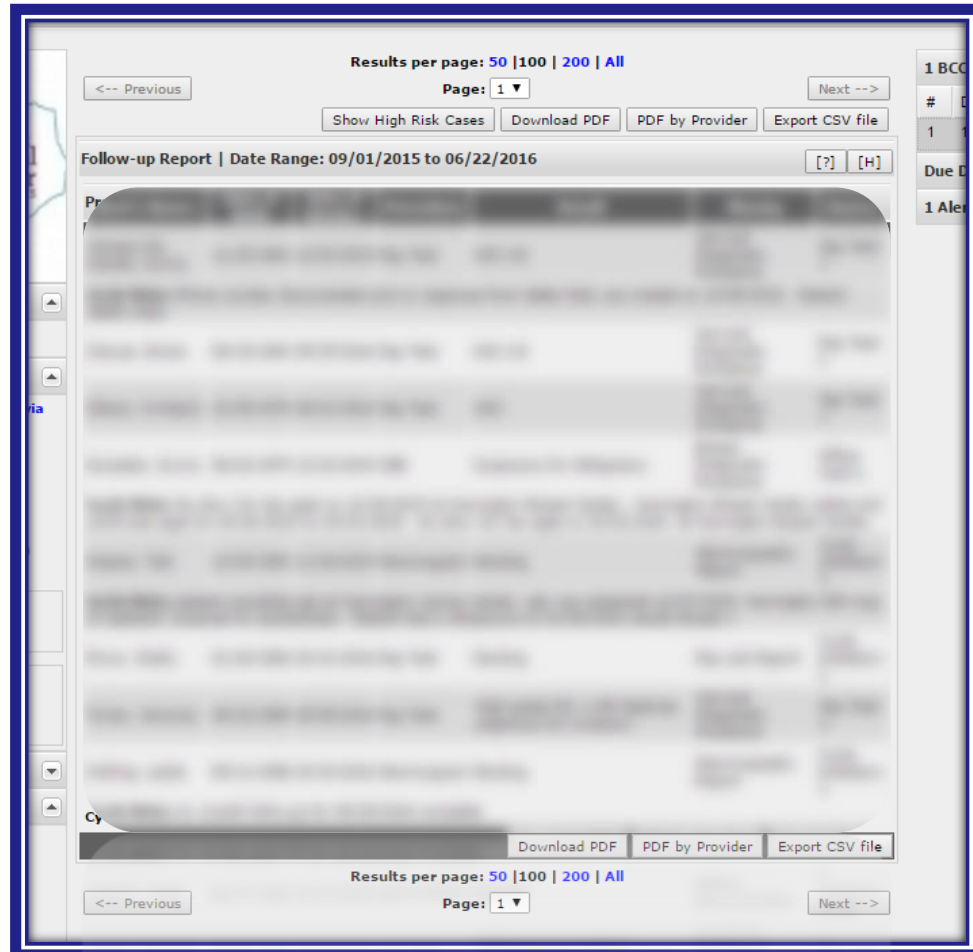
- Follow-Up Report
- Summary of Claims Report
- Screening Rate Summary (SRS) Report
- Demographics Report
- Performance Indicator Report
- To Do List

Follow-Up Report

(Reports/Utilities>Quality>Follow-Up – BCC)

Summarizes all pending follow-up examinations, diagnosis, and treatment initiation for a specified time frame.

- Follow up Report



Results per page: 50 | 100 | 200 | All

Page: 1

Show High Risk Cases Download PDF PDF by Provider Export CSV file

Follow-up Report | Date Range: 09/01/2015 to 06/22/2016

[?] [H]

Name	Address	City	State	Zip	Date
1 BCC					
#					
1					
Due D					
1 Alex					

Download PDF PDF by Provider Export CSV file

Results per page: 50 | 100 | 200 | All

Page: 1

Summary of Claims Report

(Reports/Utilities>Billing>Summary of Claims)

This provides a single place to see all open, closed, or both claims submitted by a selected provider and see where it is at in the billing process. It also provides a way to generate an end of year or other periodic report which summarizes how much they billed, were paid, and had disallowed among other values.

Summary of Claims report

Summary of Claims Report

Summary ReportDetailed Report

Summary of Claims - Billing Period Total Amounts

Billed	Paid	Non-CV/RJT
\$98,013.15	\$81,612.92	\$0.00

Page 1 of 1

Displaying 1 - 1 of 1

Summary of Claims - Summary Report

Client	DOS	Billed	Paid	Non-CV/RJT	Date Authorized
11/04/2015	\$242.02	\$242.02	\$0.00	12/16/2015	
10/20/2015	\$136.59	\$136.59	\$0.00	12/16/2015	
03/29/2016	\$136.59	\$136.59	\$0.00	05/10/2016	
11/18/2015	\$136.59	\$136.59	\$0.00	01/21/2016	
11/06/2015	\$136.59	\$136.59	\$0.00	01/21/2016	
09/22/2015	\$136.59	\$136.59	\$0.00	11/09/2015	
11/05/2015	\$136.59	\$136.59	\$0.00	01/21/2016	
10/20/2015	\$136.59	\$136.59	\$0.00	12/16/2015	
10/29/2015	\$242.02	\$242.02	\$0.00	01/21/2016	
11/19/2015	\$131.16	\$131.16	\$0.00	01/21/2016	
10/26/2015	\$136.59	\$136.59	\$0.00	12/16/2015	
09/15/2015	\$122.31	\$122.31	\$0.00	01/21/2016	
10/16/2015	\$181.16	\$181.16	\$0.00	11/09/2015	
09/24/2015	\$242.02	\$242.02	\$0.00	11/09/2015	
02/16/2016	\$181.16	\$181.16	\$0.00	04/22/2016	

Screening Rate Summary (SRS) Report (Reports/Utilities>Admin>SRS – BCC)

This report is designed to allow managers to get a summary of the number of screenings performed during a selected time period as well as the number and rate of abnormalities and diagnostic procedures. Furthermore, it lists the number of each type of Pap Test and mammogram finding, cervical and breast final diagnosis results, and diagnostic and treatment disposition.

SRS Report

[Clinical Estimate](#)
[Download PDF](#)

Screening Rates Summary Report

[?]
[H]

Show: ☒ Numbers | ☒ Rates | ☒ Procedures | ☒ Findings | ☒ Final Diagnosis | ☒ Disposition

Date of service range: 09/08/2015 to 06/15/2016

Selected criteria:

Programs

- BCC

States

- Texas

Numbers																											
<p>Number of Women</p> <p>Enrolled and screened: 12009</p> <p>First Screen: 13234</p> <p>Rescreened: 8210</p> <p>Total Screened: 21063</p> <p>Referred in women: 1044</p>	<p>Office Visits</p> <p>First Visits: 10276</p> <p>Subsequent Visits: 6145</p> <p>Follow-up Visits: 2097</p> <p>Total Visits: 18518</p>	<p>CBE</p> <p>Screenings: 12093</p>																									
<p>Mammograms</p> <table style="width: 100%;"> <thead> <tr> <th>Dig.</th> <th>Con.</th> <th>Tot.</th> </tr> </thead> <tbody> <tr> <td>First: 6652</td> <td>508</td> <td>7160</td> </tr> <tr> <td>Rescreen: 3876</td> <td>542</td> <td>4418</td> </tr> <tr> <td>Total: 10528</td> <td>1050</td> <td>11581</td> </tr> </tbody> </table> <p>Technically Unsat: 2</p> <p>Mam Ordered: 11828</p> <p>Mam Not Performed: 752</p> <p>Mam Done: 11076</p>	Dig.	Con.	Tot.	First: 6652	508	7160	Rescreen: 3876	542	4418	Total: 10528	1050	11581	<p>Pap Smears</p> <table style="width: 100%;"> <thead> <tr> <th>Liq.</th> <th>Con.</th> <th>Tot.</th> </tr> </thead> <tbody> <tr> <td>First: 5487</td> <td>22</td> <td>5534</td> </tr> <tr> <td>Rescreen: 1347</td> <td>10</td> <td>1365</td> </tr> <tr> <td>Total: 6834</td> <td>32</td> <td>6899</td> </tr> </tbody> </table>	Liq.	Con.	Tot.	First: 5487	22	5534	Rescreen: 1347	10	1365	Total: 6834	32	6899	<p>HPV Tests</p> <p>Tests Performed: 3518</p> <p>Positive: 627</p> <p>Negative: 2873</p> <p>Indeterminate: 16</p>	
Dig.	Con.	Tot.																									
First: 6652	508	7160																									
Rescreen: 3876	542	4418																									
Total: 10528	1050	11581																									
Liq.	Con.	Tot.																									
First: 5487	22	5534																									
Rescreen: 1347	10	1365																									
Total: 6834	32	6899																									

Demographics Report

(Reports/Utilities>Admin>Demographic)

The Demographic Report is a statistical summary of client data. Counts and percentages are provided for the various output options, which include categories for:

- Age
- Race
- Ethnicity
- Education
- Income
- Disability status and type
- County of residence

Demographics

Demographic Report Form

Clear Criteria Reload Last Criteria Show Last Report Generate Report

This Report May Contain Protected Health Information

Date Range/Programs

Start Date: 09/01/2015
End Date: 08/31/2016
Program: BCC

Date Type

☐ Active During Date Range
☒ Screened During Date Range

Other Options

☐ Only Include CDC Reported Cycles
☒ Include All Clients
☐ Only Include First Screen Clients
☐ Only Include Rescreened Clients

Selection Criteria

Providers:

Gender: Please Select
Hispanic: Please Select
Insurance: Please Select
Disability: Please Select
Learned of Program: Please Select
Races: Please Select
Languages: Please Select

☐ Age

Partner With: Please Select
Eligibility: Please Select
Education: Please Select
Disability Type: Please Select
Regions: Please Select
States: Please Select
Counties: Please Select
Zip Code:

Output Selection

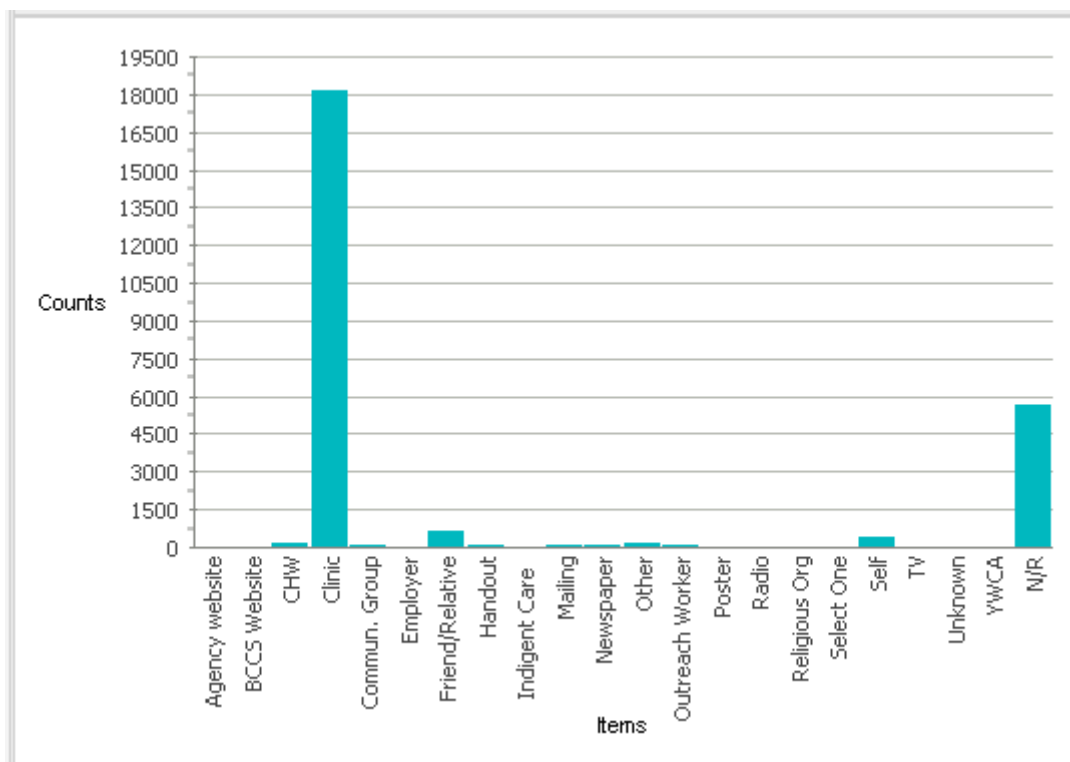
☒ Enrollment & Screening Counts
☐ Region
☐ Hispanic
☐ Education
☐ Age
☐ Disability Type
☐ Gender

☐ Program Participation
☐ Patient Status
☐ State
☐ Eligibility
☒ Insurance
☒ Providers
☐ Cycle Referral

☐ Partner With
☐ Race
☐ County
☐ Primary Language
☐ Disability
☒ Learned of Program
☐ Screening Adherence

Demographics Ex

- Learned of program SFY16



Performance Indicator Report

(Reports/Utilities>Quality>Performance Indicator - BCC)

The Performance indicator report shows the MDE details and status. This report can be utilized to ensure you meet the goals of the MDE benchmarks. In addition to providing the statistical values CDC monitors, the PI Report is also a valuable tool to use in ensuring that data are entered correctly and that follow-up has been documented. This is accomplished using a variety of sub-reports available within the report

Performance Indicators (PI) Reports

Performance Indicator - BCC Report

Criteria/ExportPI SummaryMgmt. IndPI 1 (M)PI 2 (M)PI 3 (M)PI 4 (M)PI 5 (M)PI 6 (M)PI 7 (M)PI 8 (M)PI 9 (M)PI 10 (M)PI 11 (M)

PI Summary

Export as PDF

Indicator	Description	Numerator	Denominator	Percentage	Goal
1	Percentage of initial program pap tests provided to never/rarely screened women (Goal: >= 20%)	5090	6998	72.74%	Met
2	Percentage of abnormal pap tests with complete follow-up (Goal: >= 90%)	503	540	93.15%	Met
3	Percentage of abnormal pap tests where the time between the pap test and final diagnosis was > 90 days (Goal: <= 25%)	21	503	4.17%	Met
4	Percentage of final diagnosis of HSIL, CIN2, CIN3/CIS or invasive cervical carcinoma where treatment has been started (Goal: >= 90%)	670	721	92.93%	Met
5	Percentage of final diagnosis of HSIL, CIN2, or CIN3/CIS where the time between the date of final diagnosis and the date of treatment initiation is > 90 days(Goal: <= 20%)	10	618	1.62%	Met
6	Percentage of final diagnosis of Invasive cervical carcinoma where the time between the date of final diagnosis and the date of treatment initiation is > 60 days(Goal: <= 20%)	0	52	0.00%	Met
7	Percentage of NBCCEDP funded mammograms provided to women 50 years of age and older (Goal: >= 75%)	9243	11062	83.56%	Met
8	Percentage of abnormal breast screening with complete follow-up (Goal: >= 90%)	4831	5356	90.20%	Met
9	Percentage of abnormal breast screening where the time between the screening and final diagnosis was > 60 days (Goal: <= 25%)	243	4831	5.03%	Met
10	Percentage of final diagnosis of breast cancer where treatment has been started (Goal: >= 90%)	218	234	93.16%	Met
11	Percentage of final diagnosis of breast cancer where the time between the date of final diagnosis and the date of treatment initiation is > 60 days (Goal: <=20%)	4	218	1.83%	Met

PI Details

Performance Indicator - BCC Report

Criteria/Export

PI Summary

Mgmt. Ind

PI 1 (M)

PI 2 (M)

PI 3 (M)

PI 4 (M)

PI 5 (M)

PI 6 (M)

PI 7 (M)

PI 8 (M)

PI 9 (M)

PI 10 (M)

PI 11 (M)

Performance Indicator 2 (DQIG 11.a):

The percent of abnormal Pap smears that have a complete work-up with a diagnostic procedure and final diagnosis recorded

Export as PDF

Description	Number	Percentage
Cases	540	
Work-up complete	503	93.15% (Goal >= 90%)
Work-up pending	31	5.74% (Goal >= 90%)
Lost to follow-up	2	0.37% (Goal >= 90%)
Workup refused	2	0.37% (Goal >= 90%)
Incomplete	2	0.37% (Goal >= 90%)

Clients

Export as PDF

ID	Name	DOB	DOS	DOD	Cycle	Days	Status	Provider	Final Diagnosis

To-Do List

To Do List

(Report/Utilities>Admin>To-Do List)

Users can view tasks assigned to them as well as tasks that they have created and assigned to other users.

To-Do List

To Do List

Assigned To You

Assigned By You

List of To Do's







H

Add

Edit

Delete

Export

ID	Client	Task	Assigned To	Due Date	Client Info	Notes	Complete
556035	8 BB	beep beep meep beep	Anna Osbourne	05/04/2016			
0	None	meep	Greg A Valverde	06/30/2016			

Training Cycles

Training Cycles

- Quarterly trainings
 - New user
 - Intermediate

Next Training is for new users

September 27th & 28th 2016

-
- User Guide
 - FY17
 - System Modifications
 - EDI
 - More reports
 - Adding forms in MED-IT
 - Opportunity to delete claims
 - Excel downloads of PI reports

Questions

Questions?

Greg Valverde, Systems Analyst

Greg.Valverde@hhsc.state.tx.us

Questions about Med-IT:

Med-IThelpdesk@hhsc.state.tx.us

Questions about program policy:

BCCSprogram@hhsc.state.tx.us

Phone: (512) 776-7796